# **Enrollment Guide**

Town of Amherst Deferred Compensation Plan









# Are You Ready For A Bright Financial Future?

Making the decision to enroll in your employer-sponsored retirement plan is a great start. Enrolling is the most important step in your journey to retirement readiness. And this guide puts you on the right path quickly and easily.

Before you enroll, it's a good idea to review all of the information in this guide in order to make decisions that meet your individual needs:

- · Plan Features and Highlights Provides specific information about your plan's features
- · Forms All of the paperwork you need to enroll successfully
- Fund Information Includes fund objectives and risk levels
- Fund Performance and Fees Shows asset class categories, fund returns over time, and any fund fees.

Once you have learned about your plan and are ready to enroll, follow these two simple steps.

#### Step 1:

#### **Complete the Participant Enrollment Form**

To access the Participant Enrollment Form, turn to the first page after the tab in this booklet. You will need to provide the following information:

- Personal Information Provide your name, address, Social Security number, date
  of birth, etc.
- Contribution Amount Contribute more today to potentially have more for your future
- Fund Choices Build a diversified portfolio based on your retirement goals¹

#### Step 2:

#### **Select Your Beneficiary**

Here is the information you'll need to provide when choosing your beneficiaries:

- · Your Personal Information
- · Personal Information for Your Primary Beneficiary
- Personal Information for Your Contingent Beneficiary (if applicable)

Note: If you don't have all the necessary information for your beneficiaries at this time, you can still enroll, but you should choose your beneficiaries as soon as possible once you have the information needed.

Read the information provided in this booklet regarding your investment options to help you build a diversified portfolio.¹ Once you've made your investment selections, assign a percentage of your contribution amount to each of your investment choices by entering a percentage between 1% and 100% next to your investment choice(s) on the form. Your choices must total 100%.



#### **Special Feature**

Take advantage of Reality Investing® Advisory Services (Advisory Services) provided by Advised Assets Group, LLC (AAG), a federally registered investment adviser. It includes a Managed Account option, which provides valuable benefits if you're a Do-lt-For-Me<sup>SM</sup> investor:

- · Ongoing portfolio management based on your personal financial profile
- Personalized retirement readiness statement
- · Investment adviser representatives available for consultation

Advisory Services also offers Online Investment Advice for Help- Me-Do-It<sup>5M</sup> investors and Online Investment Guidance for Do-It- Myself™ investors. Additional information regarding any fees related to Advisory Services is provided later in this material.

There is no guarantee that participation in Advisory Services will result in a profit or that your account will outperform a selfmanaged portfolio.

#### **Quick Tip**

Get the most out of this valuable employer-provided benefit with a higher contribution amount. The more you save today means potentially more for your future. Get the retirement income you want and deserve so you can continue your current lifestyle when you're retired by contributing as much as you can.



### **Important Reminder**

Let us know if you have assets from a previous employer's plan or an IRA. If your employer allows rollovers, we can help you roll that money into your current plan for a simplified, one-stop retirement planning strategy.4



#### For More Information

Visit<sup>2</sup>



#### Remember:

You can make changes to your plan at any time by visiting www.empower-retirement.com/participant.2

# Town of Amherst Deferred Compensation Plan Features and Highlights

Read these highlights to learn more about your Plan. If there are any discrepancies between this document and the Plan Document, the Plan Document will govern.

# About the 457(b) Deferred Compensation Plan

A governmental 457(b) deferred compensation plan (457 plan) is a retirement savings plan that allows eligible employees to supplement any existing retirement and pension benefits by saving and investing before-tax dollars through a voluntary salary contribution. Contributions and any earnings on contributions are tax-deferred until money is withdrawn. Distributions are subject to ordinary income tax.

#### **Eligibility Requirements**

Only full-time benefited employees working 20 hours or more are eligible to participate.

#### **Enrollment**

You may enroll by completing an enrollment form and returning it to your Plan administrator.

#### 2017 Contribution Limits

- Combined maximum limit of 100% (\$1 minimum) of your compensation or \$18,000, whichever is less for all retirement contributions.
- "Standard" Catch-Up allows participants in the three calendar years prior to normal retirement age to contribute more (up to double the annual contribution limit— \$36,000). The amount that you may be able to contribute under the Standard Catch-Up option will depend upon the amounts that you were able to contribute in previous years but did not.

Participants turning age 50 or older in 2017 may contribute an additional \$6,000. Please note that you may not use the Standard Catch-Up provision and the Age 50+ Catch-Up provision in the same year.

#### **Vesting Schedule**

Vesting refers to the percentage of your account you are entitled to receive upon the occurrence of distributable events. Your contributions and any earnings are always 100% vested (including rollovers from previous employers).

#### Investment Options<sup>1</sup>

A wide array of core investment options is available through your Plan. Each option is explained in further detail in your Plan's fund sheets. Once you have enrolled, investment option information is also available through the Web site at www.empower-retirement.com/participant or call the Voice Response System toll free at (888) 672-7240. The Web site and the Voice Response System are available to you 24 hours a day, 7 days a week.<sup>2</sup>

#### **Transfers and Allocation Changes**

Use your Personal Identification Number (PIN) and Username to access the Web site or you can use your Social Security number and PIN to access the Voice Response System. You can move all or a portion of your existing balances between investment options (subject to Plan rules) and change how your payroll contributions are invested.

#### Rollovers

Only Plan administrator approved balances from an eligible governmental 457(b), 401(k), 403(b) or 401(a) plan or an Individual Retirement Account (IRA) may be rolled over to the Plan.

You are encouraged to discuss rolling money from one account to another with your financial advisor/planner, considering any potential fees and/or limitation of investment options.

#### Withdrawals

Qualifying distribution events are as follows:

- Retirement
- Severance of employment (as defined by the Internal Revenue Code provisions)
- Attainment of age 70½ (if allowed by government Plan's provisions)
- Death (your beneficiary receives your benefits)
- Unforeseeable emergency (as defined by the Internal Revenue Code and if allowed by your Plan's provisions)
- Transfer to purchase service credit

Each distribution is subject to ordinary income tax except for an in-service transfer to purchase service credit. Distributions you receive prior to age 59½ from money sources other than governmental 457(b) money sources may be subject to the 10% early withdrawal federal tax penalty.

#### Plan Fees

#### Recordkeeping or Administrative Fees:

There is an annual Asset Charge of 0.30% that is calculated and deducted quarterly.

#### **Distribution Fees:**

There are no Plan distribution fees.

#### **Investment Option Fees:**

Each investment option has its own operating expenses. These fees are deducted by each investment option's management company before the daily price or performance is calculated. Fees pay for trading of securities within the investment options and other management expenses.

Funds may impose redemption fees and/or transfer restrictions if assets are held for less than the published holding period. Asset allocation funds are generally subject to a fund operating expense at the fund level, as well as prorated fund operating expenses of each underlying fund in which they invest. For more information, please refer to the fund prospectus and/or disclosure document. Funds are subject to the risks of the underlying funds.

There may be a recordkeeping or administrative fee for investing in certain investment options. Please contact your Empower Retirement representative for more information about any potential investment option fees.

The Great-West SecureFoundation® Guarantee Benefit Fee is in addition to the fees and expenses of the Plan. For more important information regarding Great-West SecureFoundation, including product specifics and fees, refer to the Great-West SecureFoundation Summary Disclosure Statement attached to the Enrollment Form and also located on your Plan's website.

#### Loans

Your Plan allows you to borrow the lesser of \$50,000 or 50% of your total vested account balance. The minimum loan amount is \$1,000, and you have up to five years to repay your loan—up to 15 years if the money is used to purchase your primary residence. There is a \$60 origination fee for each loan that is deducted from the loan proceeds, plus an ongoing annual \$35 fee, deducted quarterly from your account at \$8.75. You may have 2 outstanding loans at a time.

How Can I Get More Information? Visit the Web site at www.empower-retirement.com/participant or call the Voice Response System, toll free at (888) 672-7240 for more information. The Web site provides information regarding your Plan, as well as financial education information, financial calculators and other tools to help you manage your account.

1 All information contained on the website, in prospectuses, and in other investment option documents is offered in English. Please have this information translated for your understanding.

2 Access to voice response system and/or any website may be limited or unavailable during periods of peak demand, market volatility, systems upgrades/maintenance or other reasons. Transfer requests made via the website or voice response system received on business days prior to close of the New York Stock Exchange (4:00 p.m. Eastern Time or earlier on some holidays or other special circumstances) will be initiated at the close of business the same day the request was received. The actual effective date of your transaction may vary depending on the investment option selected.

Core securities, when offered, are offered through GWFS Equities, Inc. and/or other broker dealers.

GWFS Equities, Inc., Member FINRA/SIPC, is a wholly owned subsidiary of Great-West Life & Annuity Insurance Company.

Representatives of GWFS Equities, Inc. are not registered Representatives of Empower Retirement do not offer or provide investment, fiduciary, financial, legal or tax advice, or act in a fiduciary capacity, for any client unless explicitly described in writing. Please consult with your investment advisor, attorney and/or tax advisor as needed.

Empower Retirement refers to the products and services offered in the retirement markets by Great-West Life & Annuity Insurance Company (GWL&A), Corporate Headquarters: Greenwood Village, CO; Great-West Life & Annuity Insurance Company of New York, Home Office: NY, NY; and their subsidiaries and affiliates. The trademarks, logos, service marks, and design elements used are owned by their respective owners and are used by permission.

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Form# 340330-01PH 457 1215/2016 AM 79852T-1116

## Participant Enrollment Governmental 457(b) Plan

<b>Town of Amherst</b>	<b>Deferred Compensation P</b>	lan	340330-01
Participant Informatio	n		
3	5 S S		
Last Name	First Name MI	Social Security	y Number
Ma	niling Address	E-Mail Ad	ldress
		☐ Married ☐ Unmarried	□ Female □ Male
City  ( )  Home Phone	State Zip Code  ( )  Work Phone	Mo Day Year Date of Birth	Mo Day Year Date of Hire
		Annual Income	
		Do you have a retirement savings a employer or an IRA?   Yes or 0	
		gular mail via the U.S. Postal Service. If participant for fast and easy enrollmer	
Payroll Information			я
☐ I elect to contribute \$ to the Governmental 45	(\$1.00 - \$18,07(b) Deferred Compensation Plan until	000.00) per pay period of my compensati I such time as I revoke or amend my ele	ion as before-tax contributions ection.
	Payroll Effecti	ve Date:	
Managed Accounts Ser	vice Information		
future contributions and wi good order by Service Prov market close will be consid with this service and under Accounts Agreement. If yo	Il rebalance your account quarterly, if no rider prior to New York Stock Exchange ered received the next business day. By stand the fee will be deducted from my ou prefer to make your own investment	p, LLC ("AAG") will automatically directives to the excessary. This election will be effective to the market close. Any request received after electing the Managed Accounts Service account on a quarterly basis in accordant decisions and not participate in this secuctions in the Investment Option Information	the day of receipt if received in ter New York Stock Exchange e, I agree to the fees associated ace with the attached Managed rvice, simply select the Select

#### Managed Accounts Service:

□ By checking this box, I elect to have my account professionally managed by Advised Assets Group, LLC ("AAG") until such time as I revoke or amend my election.

#### -OR-

## **Select My Own Investment Options:**

- □ I elect to direct my own investments. By declining the Managed Accounts Service, I agree to, understand and acknowledge the following:
  - 1. I had the opportunity to have an investment expert, Advised Assets Group, LLC ("AAG"), make investment decisions on my behalf and I chose not to accept this option.
  - 2. I am required to direct all the investments of my accounts (current balance, future contributions and rollover monies) in this Plan by completing the investment election in the Investment Option Information section.

				340330-01
Last Name	First Name	M.I.	Social Security Number	Number

- 3. I take full responsibility for my own investment elections.
- 4. I have received and reviewed the information in my enrollment kit about my investment choices and have had an opportunity to freely choose how my accounts are invested. I further understand and agree that my employer and other Plan fiduciaries will not be liable for the results of my personal investment decisions.

Make your investment election for future deposits in the Investment Option Information section.

## Do not complete this section if you are electing to enroll in the Managed Accounts Service.

Investment Option Information (applies to all contributions) - Please refer to your communication materials for information regarding each investment option.

I understand that funds may impose redemption fees on certain transfers, redemptions or exchanges if assets are held less than the period stated in the fund's prospectus or other disclosure documents. I will refer to the fund's prospectus and/or disclosure documents for more information.

#### INVESTMENT OPTION

#### INVESTMENT OPTION

NAME TICKE	R CODE	<u>%</u>	NAME TICKER	CODE	%
*Great-West SecureFoundation LT 2015 G MXSJX	MXS15G	_/0_	Invesco American Franchise R5	VAFNX	_/0_
*Great-West SecureFoundation LT 2013 G MXSMX	MXS20G	-		PU-CAP	-
		-	Prudential Capital Growth Acct	ALL STORY OF BUILDINGS VIEW	
*Great-West SecureFoundation LT 2025 G MXSNX	MXS25G	77	Prudential Equity Acct	PU-EQU	
*Great-West SecureFoundation LT 2030 G MXSQX	MXS30G		Prudential Stock Index Acct	PU-SI	
*Great-West SecureFoundation LT 2035 G MXSRX	MXS35G	-	Vanguard 500 Index AdmiralVFIAX	VFIAX	
*Great-West SecureFoundation LT 2040 G MXDSX	MXS40G		Vanguard Windsor II Fund	VG-WII	
*Great-West SecureFoundation LT 2045 G MXSTX	MXS45G		Calvert Balanced A CSIFX	CA-SIM	
*Great-West SecureFoundation LT 2050 G MXFSX	MXS50G	-	Fidelity Balanced Fund FBALX	FD-BAL	
*Great-West SecureFoundation LT 2055 G MXSYX	MXS55G	-	Prudential Conservative Balanced	PU-BAL	
*Great-West SecureFoundation Balanced GMXSBX	MXSBLG		Prudential Flexible Managed AcctN/A	PU-FLX	
Great-West Aggressive Profile II Fund I MXAPX	MXAGP	-	Vanguard Wellington FundVWELX	VG-WEL	
Great-West Conserv Profile II Fund I MXCPX	MXCNP		American Funds Bond Fund of Amer R4 RBFEX	RBFEX	
Great-West Mod Aggr Profile II Fund I MXBPX	MXMAP		Dreyfus US Treasury IntermediateDRGIX	DR-UST	
Great-West Mod Conserv Profile II Fund I MXDPX	MXMCP		Invesco Short Dur Infltn Protected R5ALMIX	AI-LMI	
Great-West Moderate Profile II Fund I MXMPX	MXMDP		Janus Flexible Bond Fund TJAFIX	JA-FLI	
Dodge & Cox International Stock DODFX	DODFX		Prudential Diversified Bond Account	PU-DIV	
Prudential Global Acct	PU-GLB	2	Prudential Government Income Acct	PU-GOV	
Oppenheimer Mid Cap Value A QVSCX	OP-QSC	a	Fidelity U.S. Bond Index Investor FBIDX	FBIDX	
American Century Heritage Inv TWHIX	TWHIX		ICMA Stable Value Pool	IC-SVP	
Dreyfus Active MidCap Fund ADNLDX	DR-NLF		Lincoln Fixed Fund	LN-FIX	
American Century Ultra Inv TWCUX	20-ULT		Prudential Fixed Fund, N/A	PU-FIX	
Fidelity Growth Company Fund	FD-GRO		Great-West Government Money Market Inst MXGXX	MXGXX	
INVESCO Charter R5	AI-CHI		MUST INDICATE WHOLE PERCENTAGES	= 1	100%

#### Plan Beneficiary Designation

This designation is effective upon execution and delivery to Service Provider at the address below. I have the right to change the beneficiary. If any information is missing, additional information may be required prior to recording my beneficiary designation. If my primary and contingent beneficiaries predecease me or I fail to designate beneficiaries, amounts will be paid pursuant to the terms of the Plan Document or applicable law.

You may only designate one primary and one contingent beneficiary on this form. However, the number of primary or contingent beneficiaries you name is not limited. If you wish to designate more than one primary and/or contingent beneficiary, do not complete the section below. Instead, complete and forward the Beneficiary Designation form.

#### Great-West SecureFoundation®

If I have elected Guaranteed Annual Withdrawals with a Joint Covered Person, my spouse must be my sole primary beneficiary.

Primary Beneficiary 100.00%				
% of Account Balance	Social Security Number	Primary Beneficiary Name	Relationship	Date of Birth
( )				
Phone Number (Optional)				
<b>Contingent Beneficiary</b>			1 1	
100.00%				
% of Account Balance	Social Security Number	Contingent Beneficiary Name	Relationship	Date of Birth

		***************************************		340330-01
Last Name	First Name	M.I.	Social Security Number	Number
)				
hone Number (Optional)				
'articipation Agreement	22 22			
nformation regarding the Gu he Guaranteed Lifetime Witl all your Service Provider at		Benefit. Addition www.empower-ret	nal documentation concerning irement.com/participant. If you	the features associated w u have any questions, plea
estrictions on transfers and/	understand that the Internal Revor distributions. I understand the understand the ligible to receive distributions.	at I must contact	the Plan Administrator/Truste	Plan Document may import to determine when and and
orm for processing, I am re nformation section. I unders hat all payments and accoun- and, upon redemption, share	ect to direct my own investment equesting to have investment of tand and agree that this account t values, when based on the expe is may be worth more or less the losure documents and Fund Pro-	options established is subject to the te crience of the investant can their original	ed under the Plan as specified erms of the Plan Document. I u estment options, may not be gu cost. I acknowledge that inve	I in the Investment Opti nderstand and acknowled aranteed and may fluctua estment option information
ransfers or rollovers, will be nvestment option informatio lections. Dollar cost averag pplicable fees will be deduc ny Social Security number, d	re my account managed by Adv professionally managed and I h in is completed, my election to h ing and asset allocation are not ted from my account. In order to late of birth, gender, marital statuthe Managed Accounts Service.	nave not complete ave my account p t available if my o enroll in the Ma as and annual inco	ed the Investment Option Infor rofessionally managed will ove account is professionally man anaged Accounts Service, I und	mation section. In the eve erride my investment opti aged. I understand that t derstand that I must provi
nay be necessary to ensure and/or the Code. I understand understand that it is my resp	ument and/or the Code - I agre that my participation in the Plan I that the maximum annual limi ponsibility to monitor my total a it, I assume sole liability for an	n is in compliance t on contributions annual contributions	the with any applicable requires is determined under the Plan ons to ensure that I do not exce	ment of the Plan Docume Document and/or the Co
at the address below prior to allocating them to the defaul- to the payor as required by la System or access the Web site	stand that in the event my Partic to the receipt of any deposits, I st t investment option selected by aw. Once an account has been e in order to transfer monies fron d on my behalf will be applied to	specifically conso the Plan. If no de established on my n the default inves	ent to Service Provider retaini fault investment option is sele behalf, I understand that I m stment option. Also, I understan	ng all monies received a ected, funds will be return ust call the Voice Respond all contributions receiv
rrors. Corrections will be m lays, account information sh	derstand that it is my obligation ade only for errors which I com all be deemed accurate and acco ssed from the date of notification	municate within eptable to me. If I	90 calendar days of the last ca I notify Service Provider of an	lendar quarter. After this
	Fee - If you elect the Managed dvised Assets Group, LLC ("A			
Signature(s) and Consen	t			
Participant Consent				
Agreement. I understand that Assets Control, Department of country or any person design the OFAC Web site at: http://www.treasury.gov/abo	d and agree to all pages of this let Service Provider is required to fithe Treasury ("OFAC"). As a nated by OFAC as a specially dut/organizational-structure/office	to comply with to result, Service Presignated national ces/Pages/Office-	he regulations and requiremer rovider cannot conduct busines al or blocked person. For more of-Foreign-Assets-Control.asp	nts of the Office of Foreigns with persons in a blocke information, please acceptance.
Deterral agreements must be	entered into prior to the first da	iy or me monuru	iat the deferral will be made.	9

Participant Signature

Date

A handwritten signature is required on this form. An electronic signature will not be accepted and will result in a significant delay.

Participant forward to Plan Administrator/Trustee

				340330-01
Last Name	First Name	M.I.	Social Security Number	Number
Authorized Plan Administ	rator/Trustee Approval			
Authorized Plan Admini	strator/Trustee Signature	-	Date	
A handwritten signature i	s required on this form. An electronic	signature	will not be accepted and will re	sult in a significant delay.
Print Full Name		<del>-</del>		
	Plan Admi	nistrator f	orward to Service Provider at:	
	Empower R	etirement		
	PO Box 17:			
	Denver, CO	80217-37	64	

8515 E. Orchard Road, Greenwood Village, CO 80111 **Phone #:** 1-888-672-7240 Fax #: 1-866-745-5766

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**Express Address:**